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OCT 13 2004 7168490481

T-401 P.09/10 F-736

Approved for use through 04/30/2003.

OMB 0651-0031

PTO/SB/0022 (05/03)

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number: 13325.0034						
<p>In re Application of John K. Schneider et al.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number 09/659,772</td> <td style="width: 50%;">Filed September 11, 2000</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 5px;">For Left Hand Right Hand Invariant Dynamic Finger Positioning Guide</td> </tr> <tr> <td style="width: 50%;">Group Art Unit 2623</td> <td style="width: 50%;">Examiner S. A. Ahmed</td> </tr> </table>			Application Number 09/659,772	Filed September 11, 2000	For Left Hand Right Hand Invariant Dynamic Finger Positioning Guide		Group Art Unit 2623	Examiner S. A. Ahmed
Application Number 09/659,772	Filed September 11, 2000							
For Left Hand Right Hand Invariant Dynamic Finger Positioning Guide								
Group Art Unit 2623	Examiner S. A. Ahmed							

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small entity fee are as follows (check time period desired):

<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ _____
<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$ 430
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ _____
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$ _____
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$ _____
<input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____	
<input checked="" type="checkbox"/>	A check in the amount of the fee is enclosed.	
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.	
<input type="checkbox"/>	The Director has already been authorized to charge fees in this application to a Deposit Account.	
<input checked="" type="checkbox"/>	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 08-2442. I have enclosed a duplicate copy of this sheet.	

I am the applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96)

attorney or agent of record.

attorney or agent acting under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). _____

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

October 12, 2004

Date

Signature

Martin G. Linihan

Typed or printed name

(716) 848-1367

Telephone Number

NOTE: Signature of all the inventors or assignees of record of the entire interest or their representatives are required. Submit multiple forms if more than one signature is required, see below.

Total of _____ forms are submitted.

CERTIFICATE OF MAILING (37 CFR 1.8(a))

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Date October 12, 2004

Martin G. Linihan

(Type or print name of person mailing paper)

Martin G. Linihan

(Signature of person mailing paper)